Agency:	Clinic ID:
Reviewer:	Date:

				If no, need
MPR	Facility	Yes	N/A	Action Plan
6.2f	Is the clinic and waiting area clean? (e.g., restrooms supplied with soap, toilet paper, etc.)			
6.2f	Is the clinic and waiting area safe for children? (e.g., covers			
	on electrical outlets, safe changing table, no sharp edges, no			
	open stairways, toys are large enough to prevent choking			
6.2f	Are there safe places to change diapers, with covered disposal			
0.21	container and handwashing facilities?			
2.1f	Is the clinic, waiting area and restroom barrier-free?			
	(Handicapped accessible)			
2.3b	Do facilities afford privacy for income intake, anthro and lab			
	procedures, medical history and counseling? (No personal			
	information can be overheard or seen by unauthorized			
0.0	person?) (MI-WIC Policy 1.03)			
2.3a	The local agency protects the names and addresses of clients'			
6.5a	confidential information. (MI-WIC Policy 1.03) Does the facility provide a private space for breastfeeding			
0.5a	and/or expressing milk that includes comfortable seating,			
	electrical outlet, flat surface (table or counter) and cleaning			
	supplies? (MI-WIC Policy 4.01)			
	Local Agency Required Procedures			
9.1a	Are local agency procedures developed for the following areas			
0.4	completed and reflect current MDHHS/WIC policy?			
9.1a	Disaster Plan (MI-WIC Policy 1.12)			
	a. The local agency shall develop a disaster plan that will include:			
	i. A copy of the parent agency's disaster preparedness plan,			
	if applicable.			
	ii. Local governmental/community agency emergency contact			
	information.			
	iii. State and local WIC staff contact information.			
	iv. A plan for notifying clients of service disruption, relocation,			
	and availability of WIC services.			
7.4c	Returned Formula (MI-WIC Policy 8.05) If LA chooses to			
	donate unused/returned formula to a non-profit agency, the LA			
	must have a State approved policy (using the template), including signature from LA Admin and/or legal counsel.			
4.3c	Hematological (MI-WIC Policy 2.16-A. 8)-Specify, "retest"			
4.00	criteria for agency.			
9.1a	Homeless Facility Agreement- Are there Homeless			
	Shelters/Facilities in the LA service area(s)? Y N			
	Has the agency contacted local facilities and signed the			
	Agreement (Exhibit 2.22A)? (MI-WIC Policy 2.22)			

	Administration			
		Yes	N/A	If no, need Action
MPR	Local Agency Required Procedures			Plan
12.1d	Immunization Policy (MI-WIC Policy 6.03) Only required if			
	within a local health department.			
	1. Local agency immunization collaboration policies may			
	include the following:			
	a. Immunization promotion methods			
	b. Coordination of services that addresses:			
	i. Assessment of children who are not UTD			
	ii. Provision of information to Pregnant			
	women regarding needed vaccines			
	iii. Provision of information on recommended			
	vaccination schedules			
	iv. Referral for services			
	v. Administration of vaccines			
	c. Provision of immunization training for WIC staff			
	2. Non-health department WIC agencies are encouraged to			
	collaborate with local HD within their jurisdiction to increase			
	immunization rates.			
9.1a	Nutrition Education Collaboration/WIC Agreement – Required			
	if Collaborative Program, i.e. MSUE, provides Nutrition			
	Education, including Project FRESH education. (MI-WIC Policy			
	5.08A – specifies activities performed, whom to contact, etc)			
	Cost to Client (MI-WIC Policy 2.01)			
4.1a	The certification is performed at no cost to the applicant.			
	- No medical referral <i>required</i> for enrollment—infers cost			10 A ()
	Certification Timeframes			If no, Action Plan needed
5.2a	How does the agency assure that applicants are scheduled			
	within 10 days for PG or Breastfeeding women and infants,			
	homeless or migrant families? Or within 20 days for Non-			
	lactating woman or Child?			
	(MI-WIC Policy 3.01)			
	☐Use 10/20 Day report (Clinic/Reports/Schedules/10/20			
	Day)			
	□cheduler contacts Coordinator for adjustments			
	☐ Monitor ISD Referrals for contact within timeframes			
	□Other:			
5.2	Are all authorized persons asked to verify notification			
	preferences?			
5.2c	Does the agency serve all categories? Y_ N			
	If not, has the agency notified MDHHS/WIC of a Waiting List? (MI-WIC Policy 3.02)			

5.3d	Does the agency schedule and/or perform IEVAL and CEVAL for infants and children certified for 8 months or more?			
5.3d	Are benefits NOT denied if clients do not complete IEVAL/CEVALs? (MI-WIC Policy 2.17)			
MPR	Policy Review	Yes	N/A	If No, need Action Plan
9.1a	How does Local Agency make staff aware of policy and procedure changes? (Check all that apply) staff meetings forward E-notice			
	circulate copies training Ask staff where MI-WIC and LA Policies can be accessed.			
	Returned Formula (MI-WIC Policy 8.05 & 8.05A)			
I	Reviewer: Identify local agency (LA) staff responsible for receiving and handling of formula:			
7.4c I, O	Ask or observe and verify the process of formula return:			
7.4c	Verify returned formula matches the type issued in Food Packageobtain printed copy using Food Package Display screen in MI-WIC.			
7.4a	Is the formula stored securely in a locked area, with limited WIC staff access, out of view of clients and in appropriate conditions?			
7.4b	Does the WIC Local Agency (LA) provide replacement EBT formula benefits in accordance with MI-WIC Policy 8.05 (for example, proper amount, via EBT only, etc.)?			
7.4b	Does the agency require clients to return remaining formula before formula benefits are re-issued?			
7.4c	Is all returned formula examined to determine whether eligible for disposal or donation? Including client interview, inspected for dents/damage/tampering, checked for expiration date?			
7.4c	Is all returned formula that is not donated, properly disposed of on the day of receipt?			
7.4c	Does the agency donate returned formula only to non-profit (501(c)(3)) programs in the community?			
7.4c	Does the LA maintain a paper file with all required documents? ☐ IRS Verification of 501(c) (3) ☐ Where & how often donating ☐ Class II & III proof of training/knowledge, if dispensing ☐ Donation receipt with required info ☐ Any other communications			

	Administration			
7.4d	Is the MI-WIC Formula Acceptance and Action Log (8.05A) appropriately completed and reviewed monthly?			
	Reviewer: If <i>Action Taken</i> on log is not recorded, does quantity listed match stored formula?			
7.4c	Is MI-WIC Policy 8.05 & LA policy reviewed and training provided annually to all staff?			
MPR	Formula Distribution (MI-WIC Policy 8.10)	Yes	N/A	If no, Action Plan needed
	Has the LA received formula samples? Yes No			
7.5a	If yes, is courtesy/sample formula stored separate from returned formula according to MI-WIC Policy 8.10?			
7.5b	If yes, is distribution of courtesy/sample formula documented according to MIWIC Policy 8.10 using LA Formula Receipt and Distribution Log, Exhibit 8.10A?			
MPR	Computer Security/Maintenance (MI-WIC Policy 10.03)			
10.1b	Does the agency protect each computer with MILogin access with antiviral software?			
10.1b	How does LA ensure that staff doesn't share MILogin access/accounts?			
10.1b	Does the agency remove staff roles for staff who no longer work for WIC? How is this monitored?			
2.3a	Does the agency protect client confidentiality through use of privacy screens or other means?			
	Voter Registration (MI-WIC Policy 1.10)			
5.4d	Are clients who change their address offered to change their voter registration at that time?			
5.4 d	Are clients who change their address over the phone offered a mailed voter registration form or provided the website address? Michigan.gov/vote			
5.4d	Are all voter declination forms retained for 24 months after date on form? (Review file)			
5.4d O, I	Are voter registration forms sent to county or township clerk at least on a weekly basis, or as stated in policy? (Ask/observe)			
	Transfer (MI-WIC Policy 3.04)			
5.2b	All transfer applicants are scheduled as soon as possible, so as not to interrupt program benefits, or within 20 days. (MI-WIC Policy 3.04) Review TRANSFER REPORT			
5.3c	For transfer clients, is a current and valid WIC ID, VOC or proof of current enrollment in WIC/WIC Overseas and current proof of residency the documentation needed to obtain WIC certification? (MI-WIC Policy 2.03, 2.19, 3.04)			
5.3c	Are eligible transfer clients given 1-year certification periods (from original cert date) and scheduled for infant/child evaluations (IEVAL/CEVAL)? (MI-WIC Policy 3.04)			

5.2b	For clients who transfer to another WIC Program or WIC			
	Overseas and who request certification information, are			
	certification records or VOC provided to the new WIC Program			
	without a written release (if bona fide WIC site)?			
	(MI-WIC Policy 3.04) If not, provide consultation.			16
				If no, need
				Action
MPR	Breastfeeding Education, Promotion and Support	Yes	NA	Plan
6.5a	Does the agency have a clinic environment that promotes and			
	supports exclusive breastfeeding by displaying breastfeeding			
	educational and promotional materials?			
	Do materials reflect diversity of clients served?			
	•			
	Are materials free of formula names, images and/or			
	bottles?			
	 Are the materials prominently displayed in areas visible 			
	to clients?			
	(MI-WIC Policy 4.01)			
6.5b	Does the agency orient and train all staff on their roles and			
	responsibilities in the promotion and support of exclusive			
	breastfeeding? (MI-WIC Policy 1.07, 4.01, 12.01)			
	Breastfeeding policies and agency goals?			
	Training and documentation requirements?			
	Breast pump issuance?			
6.5d	What breastfeeding promotion and support activities are			
	available to clients prenatally and during the postpartum			
	period? <u>How often?</u> <u>Location</u>			
	BF classes			
	Support Groups			
	Peer Counselors			
	1 dai dadiladiata			
	Other:			
0.5.1	(MI-WIC Policy 4.01, 4.02)			
6.5d	What are the after-hours availability of the Peer Counselor?			
	(e.g. cell phone use, extended clinic hrs-evening, weekends,			
	etc.)			
	(MI-WIC Policy 12.02)			
9.1a	Does the agency maintain an up-to-date breast pump			
	inventory? Physical inventory required.			
	, , ,			
	Who monitors?			
	How often?			
	(MI-WIC Policy 4.04)			
	(IVII-VVIG FUIICY 4.U4)	1		l

	Administration	1		
6.5d	Is there a process in place to address the client's			
	breastfeeding concerns prior to a food package or			
	breastfeeding status change?			
	Recordkeeping/Accountability			If no, need
	Inventory and Log records			Action
MPR	, G	Yes	NA	Plan
9.1a	Does the agency maintain full and complete records			-
01.0	concerning program operations, including equipment			
	purchases/Computer Inventory Log/loaner breast pumps			
	/warranty documentation?			
	Review computer inventory (computers, printers, scanners,			
	signature pads)-inventory signed annually by coordinator.			
	Review inventory of WIC purchased item \$2500 or more.			
	(MI-WIC Policy 10.01)			
9.1b	Does the agency retain all records required for audit or			
	litigation until completion of the audit or litigation process, or			
	for specified periods? (MI-WIC Policy 1.06)			
	Staff (MI-WIC Policy 1.07)			
2.3a	Does the agency require staff and volunteers to sign the			
	Michigan WIC Employee Confidentiality and Compliance			
	Agreement Signature Form annually?			
	Review file. (MI-WIC Policy 9.02A)			
3.1i	Is required staff training ongoing and documented according to			
	MI-WIC Policy 1.07?			
3.1i	Are staff providing nutrition services observed for competency-			
	based nutrition services skills annually?			
	·			
	Dual Enrollment/Participation (MI-WIC Policy 3.03)			
5.5a	Does the agency routinely search statewide for the Authorized			
J.Ja	Person AND the client record before "Pre-certifying" a new			
	client/family to <i>prevent</i> dual enrollment?			
5.5a	Does the agency follow the WIC Dual Enrollment resolution			
5.5a	process in MI-WIC Policy 3.03?			
	process in wii-wic Policy 3.03?			
10.1a	Does the agency review Dual Enrollment listings to determine			
10.1a	if duplicate benefits were issued and mark <u>only</u> those clients			
	· · · —			
10.1a	for "investigate" (compliance)? (MI-WIC Policy 9.01)			
10.1a	Does the agency follow-up and document any compliance			
	investigation pertaining to possible WIC/WIC dual			
MDD	participation? (MI-WIC Policy 9.01)			
MPR	Caseload			
5.2	Utilize the Caseload Management Report/Migrant to monitor			
	agency caseload and compliance with CPBC/contracted			
	caseload. Is the agency averaging 97% of assigned			
	caseload? (Commend if at or above 100%)%			

	Compliance	Yes	N/A	If no, need Action Plan
10.1a	Compliance Does the agency record all client fraud/compliance allegations	res	N/A	Pian
10.14	on the <i>Add Complaint</i> Screen?			
	(MI-WIC Policy 9.01, 9.02, 9.03)			
10.1b	Does agency prevent staff from certifying or providing benefits			
	to self, relatives, or friends? (ask staff and Coordinator) (MI-WIC 9.03) How?			
	9.03) 1 low :			
10.1b	Does the agency maintain records (not in MI-WIC) of			
	employee complaints on the Employee Compliance Log and			
	employee investigations on the Employee Compliance			
	Investigation Report? Review records to insure they are consistent with policy. (MI-WIC 9.02)			
10.1b	Does the agency have clinics where one staff member			
	performs the entire certification? Y N			
	If yes,			
	What clinics:			
	1) Is an ongoing audit completed as required by policy?			
	MI-WIC Policy 9.03A (100% IFF/IBP and 20% all others within 14			
	days) 2) Does the agency scan copies of all documents supporting			
	eligibility into the client's MI-WIC record?			
	Review audits performed. (MI-WIC Policy 9.03)			
	2) How are clients identified?			
	3) How are clients identified?☐ Single Cert Report			
	□ Single Cert Report □ Schedules			
	Does the agency do WIC Enrollment in the hospital?			
	□ Y			
	□ N How is information obtained?			
	110W IS IIIIOITIALIOIT Obtained:			
	Request Med WIC			
	Woman's Form Record Staff Verbal			
	- Height			
	- Weight - Hgb			
	Infant's			
	- Lngth, wght & hd circumference			
	na dicamierence			

	Lead Screening (MI-WIC Policy 6.04)	Yes	N/A	If no, Action Plan needed
4.3c	Does the agency screen clients for lead testing and refer if they have not been tested or does the agency perform lead testing on all child clients? screen & refers tests all tests MA clients			
9.1a	Ensure that billed funds are attributed to the WIC Program if WIC funded staff performs lead testing.			
12.1	If a record is not found in MCIR, are efforts made to link WIC/MCIR record to client? If not, suggest they do.			
	MIHP Outreach			
5.1b	Does the agency routinely provide referrals to MIHP/Healthy Start/Nurse Family Partnership/Great Start providers where available? (MI-WIC Policy 6.02) What programs are available: What is Referral process?			
9.1a	Review MIHP Billing Report or ask to ensure that billed funds are attributed to WIC Program if WIC staff performs assessments.			
	Fair Hearing (MI-WIC Policy 1.04)			
1.1b	Have you had any fair hearings in the past 2 years? Y N Were policy and timeframes followed?			
1.1b	Ask staff (if no Fair Hearings have been held) what are the actions to be taken if an applicant or client asks for a Fair Hearing? (MI-WIC Policy 1.04) If not familiar, recommend staff training.			
1.1b	Are Fair Hearing requests from staff/clients handled according to MI-WIC Policy 1.04?			
1.1a	Observe that Fair Hearing flyers are available. (hard copy or MI-WIC) (MI-WIC Policy 1.04B)			
MPR	Annual Review/ME Process			
9.1a	Has the agency completed annual reviews of each clinic and subcontractor using MDHHS/WIC or agency developed monitoring tools? (MI-WIC Policy 1.11) Check what is used: MDHHS Annual Review Tools MDHHS/WIC ME tools Agency developed			

	Administration			
MPR	Annual Review/ME Process cont'd	Yes	N/A	If no, Action Plan needed
9.1a	Has the agency provided feedback, training and guidance to			
	agency or sub-contractor staff regarding these annual reviews			
	and findings? (MI-WIC Policy 1.11)			
11.1a	Has the agency completed the Corrective Action Plan (CAP)			
	from their previous WIC Management Evaluation/ Annual review? (MI-WIC Policy 1.05, 1.11)			
11.1b	Has the agency allowed and facilitated access to all requested			
	records and clinics during the current review?(MI-WIC Policy 1.05)			
	High Risk Monitoring (MI-WIC 5.06)			
6.6d	Does the agency review high risk records to ensure that clients			
	are referred for counseling as required?			
	How? Check all that apply:			
	☐ High Risk Record review (at least annually)			
	☐ High Risk Report			
	☐ Observations/client interviews (at least annually)			
	□ Other:			
	How often? (at least annually)			
	Review monitoring data			
	Quality Improvement Activities			
QI 1	What Quality Improvement (QI) activities are WIC staff			
	involved?			
	□ Nutrition Services Plan			
	□ Breastfeeding Plan			
	□ Outreach Plan			
	☐ Other data driven QI Project			
	(Nutrition Service Standards, MLPH Accreditation Indicator)			

4.3c Copy of the MDHHS/MIC Laboratory Manual (dated 8-15-19) in the WIC Clinic or do staff know how to access from the MDHHS/MIC website? HemoCue machine Self-test results (PF) recorded each day that the machine is used? HemoCue machine Self-test results (PF) recorded each day that the machine is used? HemoCue machine cleaned each day it is used (outside & microcuvette holder)? Are high and low control solutions run each week that the machine is utilized and when a new too tumber of Microcuvettes is opened? Control solutions stored in the refrigerator (containing no food) until opened and then used and stored property, according to manufacturer's directions? Does the quality control log contain a record of the lot number, expiration date and acceptable ranges of the control used? Microcuvettes or control solutions used before their expiration date? Are testing work surfaces decontaminated with germicide (or freshly prepared 10% bleach solution) at the close of each day and anytime there is evidence of contamination? Are CC logs retained for 3 years and 150 days past the end of the fiscal period? Is there a CLIA Certificate of Walver for the WIC lab? (Lab Manual pg. 5) Date Anthropometric Equipment (MI-WIC Policy 2.15) Sale Anthropometric Equipment (MI-WIC Policy 2.15) Sale Does a recumbent board for accuracy with the standardized rod. Is the board accurate? Is an approved scale with at least 1 oz. sensitivity used? Is the digital scale used, is it a "clinic quality" scale? Is the digital scale used, is it a "clinic quality" scale? Is the scale on a firm surface? Is the digital scale used, is it a "clinic quality" scale? Is the digital scale used, is it a "clinic quality" scale? Is the digital scale used, is it a "clinic quality" scale? Is the digital scale used is used, is it a "clinic quality" scale? Is the digital scale used is used, is it a "clinic quality" scale? Is the balance beam scale zero-balanced at least once daily? Is the digital scale used is	MPR	Quality Assurance	Yes	If No, need
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Reviewed by:	Date:	
Consultant:	Date:	